STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL049016	A. BUILDING: **01** B. WING _____	C **07/28/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OLIN VILLAGE	**999 TABOR ROAD** **OLIN, NC 28660**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of a Biennial Construction Complaint Survey by Ed Miller and Frank Strickland on July 28, 2015. Records indicate this facility was originally licensed or submitted as a Home for the Aged on April 1, 1968. There was a later addition to the building on May 4, 1987 that increased the total capacity to 64 beds. Based on this information, the older portion of the facility was surveyed using the 1967 NC Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the rules for Adult Care Homes of Seven or More Beds. The newer portion of the building, to the rear and left of the fire wall nearest the kitchen, was reviewed using the 1978 NC State Building Code, the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the 2005 rules for Adult Care Homes of Seven or More Beds The complaint alleged that the facility had only 1 staff at some point, with having one resident that requires two staff to assist with evacuation. The complaint was substantiated and deficiencies were cited that would require a plan of correction.	C 000		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.	C 185		

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C 185	Continued From page 1 (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with Manager the facility failed to rehearse the fire plan quarterly on each shift. This deficiency affects all residents, staff and visitors by not having trained staff and trained/cooperative residents when a there is a need to evacuate the building. Findings on July 28, 2015: a. The Facility is staffed using three shift per day, but the fire plan rehearsal documention for the last 12 months was as follows; 2 for first shift, 2 for second shift and, 0 for third shift. b. The rehearsal documentation did not provided any description of how non-ambulatory residents are evacuation, like moving beds.	C 185		